

**“Where are we today, kyhealthnow
surveillance metrics”**



kyhealthnow

advancing our state of wellness

Data Limitations

- Numerous Data Sources
- National, State and Local
 - BRFSS – Behavioral Risk Factor Surveillance Survey
 - YRFSS – Youth Risk Factor Surveillance Survey
 - MCO HEDIS – Managed Care Healthcare Effectiveness Data and Information Set
- Data Size
 - Small and Large
- Identifying Gaps and Working to Collect Additional Data

Reduce Kentucky's rate of uninsured individuals to less than 5%.

Baseline: 14.9% of 4.4 million

- Enroll at least 350,000 individuals in Medicaid and/or Health Benefit Exchange plans by the end of 2015. These individuals include previously uninsured individuals, as well as previously insured individuals who are now eligible for Medicaid or who choose to purchase plans through kynect.
 - 300,290 as of March 13, 2014 (Source: Kentucky Health Benefit Exchange (KHBE))
- Increase the number of kynectors and insurance agents participating in kynect by 10% by the end of 2015.
 - 1778 Insurance Agents and 1097 kynectors/Assisters as of March 25, 2014 (Source:KHBE)

Reduce Kentucky's smoking rate by 10%.

Baseline: 28.3% of adults, 24.1% of youth, 24.4% of pregnant women

- Continue to support comprehensive statewide smoke-free legislation.
 - In progress
- Encourage Kentucky's cities and counties to continue to implement smoke-free policies.
 - 34.2% of Kentuckians covered by smoke-free ordinance (Source: KY Center for Smoke-free Policy)
- Expand tobacco-free policies to more executive branch property.
 - All correctional institutions were smoke-free properties as of March 2012.

Reduce smoking rate - cont'd

- Support increases in taxes on cigarettes and other tobacco products, and tax e-cigarettes commensurate with other tobacco products.
 - 2013 Tax Rates: Cigarettes - **\$0.60 per pack**; Snuff - \$0.19 per 1.5 oz.; Chewing Tobacco - \$0.19 per unit; OTP – 15%; E-cigarettes – 6% (Source: KRS)
- Partner with school districts and universities to implement tobacco free campuses.
 - **32 of 173 districts are tobacco free schools**
 - **16 Colleges and Universities are tobacco free schools**
- Increase use of smoking cessation therapy by 50%.
 - **9.8% of respondents used a program** (Source: 2011 BRFSS)
 - **35.5% used medications** to help quit smoking or the last time they attempted to quit smoking (Source: 2011 BRFSS)

Reduce the rate of obesity among Kentuckians by 10%.

Baseline: 19 years and older - 31.3%;

grades 9-12 - 18% (Source: BRFSS and YRFSS)

- Double the number of enrollees in the Diabetes Prevention Program through those enrolling through kynect.
 - 267 enrollees in the 9 CDC recognized In KY and Cincinnati (northern KY)
- Ensure access for all state employees to the Diabetes Prevention Program as part of the Humana Vitality program.
 - DPP benefit coverage for those meeting the inclusion criteria (Source:KEHP)

Reduce obesity – cont'd

- Work with public and private workplaces to adopt healthy concessions and vending policies reflecting federal guidelines.
 - In progress
- Provide ready access to executive branch employees to stairwells at work.
 - In progress
- Certify 10 new “Trail Towns” through the Kentucky Office of Adventure Tourism by the end of 2015.
 - Two designations and 30 are in progress (3 funded by Healthy Communities grant)
- Complete the Dawkins Rail Line Trail by the end of 2015, adding 36 miles of trail to Kentucky’s statewide trail network.
 - 17 of the 36 miles completed

Reduce obesity – cont'd

- Invest more than \$30 million in federal funds by the end of 2015 to support many community-driven initiatives for pedestrian and bicycle paths.
 - 92 Pedestrian and bicycle projects in progress
 - 21 Master pedestrian plans on file with Transportation
- Challenge school districts to increase physical activity opportunities for children through implementing comprehensive school physical activity programs.
 - Implementation of Comprehensive School Physical Activity Program at proficient or distinguished level 278 of 753 elementary schools; 92 of 331 middle schools; and 59 of 231 high schools

Reduce obesity – cont'd

- Double the number of schools rating proficient or higher for coordinated school health committees by the end of 2015.
 - Schools implementing a coordinated school health committee at proficient or distinguished level – 278 elementary schools; 92 of middle schools; and 59 high schools (Source: Practical Living/Career Studies)
- Partner with school districts to increase the number of school districts collecting and reporting body mass index (BMI) data within the Kentucky Student Information System.
 - Measures available July 2014

Reduce obesity – cont'd

- Work with early child care providers to increase opportunities to prevent obesity among our youngest children.
 - 27 child care centers implemented NAP-SACC is the Nutrition and Physical Activity Self-Assessment in Child Care program recommended by CDC
 - 30 additional child cares in process through Healthy Communities projects
- Develop initiatives to honor and recognize businesses and schools that provide greater opportunities for physical activity.
 - 186 schools are part of the Let's Move Active Schools program
 - Business in process

Reduce Kentucky cancer deaths by 10%.

Baseline: 222 deaths per 100,000 in KY compared to 176.4 per 100,000 in the U.S.

- Increase screening rates for colon, lung and breast cancer by 25% in accordance with evidence-based guidelines.
 - 65.9% of 50 plus years of age have had sigmoidoscopy or colonoscopy (Source: 2012 BRFSS)
 - 50.43% have had breast cancer screening (2012 MCO HEDIS)
- Provide a \$1 million match to the Kentucky Colon Cancer Screening Program in the 2014-2016 executive budget to provide \$2 million for screenings for uninsured and underinsured Kentuckians.
 - In budget

Reduce cancer deaths – cont'd

- Provide \$1 million to expand screenings through the Kentucky Cancer Program in the 2014-2016 executive budget to increase breast and cervical cancer screening among Kentucky women. The funding also helps women navigate the health care system.
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 - In budget
- Support legislation banning tanning bed use by children under 18 to reduce the incidence of skin cancer.
 - Legislation pending

Reduce cancer deaths – cont'd

- Increase rates of HPV vaccination by 25% in order to reduce incidence of cervical, oral, and related cancers among men and women, through support for legislation requiring HPV vaccination among boys and girls as a condition of school attendance, along with partnering with stakeholders to implement a comprehensive educational campaign regarding safety, effectiveness and importance of the HPV vaccination for both girls and boys.
 - *Female – ages 13-17*
 - *One Dose – 46%*
 - *Three or Four Doses – 73.6%* (Source: 2011 National Immunization Survey)
 - *Male – ages 9-26 (15,684)*
 - *One Dose – 53%*
 - *Two Doses – 27%*
 - *Three or Four Doses – 20%* (Source: 2011 KY Immunization Survey)

Reduce cardiovascular deaths by 10%.

Baseline: 12,000 deaths a year

- Increase by 25% the proportion of adults receiving aspirin therapy in accordance with evidence-based guidelines.
 - In progress
- Reduce the proportion of adults with uncontrolled hypertension by 10%.
 - 56.78% are controlling high blood pressure (Source: MCO HEDIS)
- Reduce the proportion of adults with hypertension who are current smokers by 10%.
 - To be determined
- Continue efforts to lower sodium intake in government-regulated facilities, given the link between sodium intake and cardiovascular disease.
 - In progress

Reduce cardiovascular deaths - cont'd

- Increase by 10% the proportion of adults who have had their blood cholesterol checked within the preceding 5 years.
 - LDL-C Screening Performed: 81.99% (Source: MCO HEDIS)
 - LDL-C Control (<100 mg/dL): 42.08% (Source: MCO HEDIS)
 - Cholesterol Screening for Adults: 83.3% (Source: MCO HEDIS)
- Increase the percentage of individuals receiving evidence-based smoking cessation treatment by 50%.
 - 9.8% of respondents used a program to help quit smoking or the last time they attempted to quit smoking (Source: 2011 BRFSS)
 - 35.5% used medications to help quit smoking or the last time they attempted to quit smoking (Source: 2011 BRFSS)

Reduce cardiovascular deaths - cont'd

- Decrease the percentage of Kentuckians with diabetes whose most recent hemoglobin A1C level was greater than 9% during the preceding year, recognizing the link between diabetes and heart disease.
 - **HbA1c Poor Control (>9.0%) : 43.04%** (Source: MCO HEDIS)
- Support the ongoing efforts of the Kentucky CARE Collaborative, a statewide effort designed to provide blood pressure awareness education within communities.
 - *In 2012 there were 9,300 educational encounters*
 - *In 2012 there were 946 showing improved blood pressure*
 - *In 2012 there were 126 participating sites*

Reduce cardiovascular deaths - cont'd

- Continue efforts to lower sodium intake in government-regulated facilities, given the link between sodium intake and cardiovascular disease.
 - In progress
- Continue support for efforts of the Stroke Encounter Quality Improvement Project, a statewide voluntary initiative among hospitals to implement evidence-based integrated cardiovascular health systems in Kentucky.
 - 16 participating hospitals

Reduce the percentage of children with untreated dental decay by 25% and increase adult dental visits by 10%.

Baseline: Children – 34.6% (Source: State Oral Health Survey)
and Adults – 60.3% (Source: 2012 BRFSS)

- Increase pediatric dental visits by 25% by the end of 2015.
 - 41.6% of KY Medicaid Children received any dental service. (Source: CMS 416 2012)
 - 47.5% of US Medicaid Children received any dental service. (Source: CMS 416 2012)
 - 68.5% of KY middle school and high school received any dental service (Source: 2013)

Reduce dental decay and visits – cont'd

- Partner with Managed Care Organizations to encourage increased utilization of dental services.
 - 45.42% have an annual dental visit (MCO HEDIS)
- Create public-private partnerships to increase to 75% the proportion of students in grades 1-5 receiving twice yearly dental fluoride varnish application.
 - To be determined
- Increase by 25% the proportion of adults receiving fluoride varnish during an annual dental visit.
 - To be determined

Reduce dental decay and visits – cont'd

- Increase by 25% the percentage of adults receiving medically indicated dental preventive and restorative services, including fillings and root canals, in accordance with evidence-based practices.
 - 59.4% of adults had a dental visit (Source: 2012 BRFSS)
- Partner with stakeholders to increase the number of dental practitioners in Kentucky by 25%.
 - *Dentists (Source: Deloitte/KY Board of Dentistry)*
 - 2240 generalists
 - 468 specialists
 - 2708 total dentists
 - *KY needs 612 additional FTE dentists (Source: Deloitte Study)*
 - *Dental Hygienist (Source: KY Board of Dentistry)*
 - 2526

Reduce deaths from drug overdose by 25%
and reduce by 25% the average number of
poor mental health days of Kentuckians.

Baseline: 1,031 Drug overdose deaths; Age-adjusted drug
overdose mortality rate in Kentucky in 2012: 23.9 deaths/
100,000 population, KY ranks #3 in nation

Number of drug overdose deaths in Kentucky in 2012 with
opioids (heroin or pharmaceutical opioids) as a contributing
factor: 569

Reduce deaths from drug overdose and reduce number of poor mental health days – cont'd

- Double the number of individuals receiving substance abuse treatment by the end of 2015.
 - 14,920 individuals received treatment in 2013 (Source: CMHC Client Event Data Set)
- Support legislation creating a “Good Samaritan Rule” for individuals seeking overdose treatment or assistance for others.
 - Legislation pending
- Expand access to naloxone by 100% among first responders and medical professionals to enable rapid administration of this life-saving treatment.
 - Legislative pending

Reduce deaths from drug overdose and reduce number of poor mental health days – cont'd

- Increase by 50% the availability of substance treatment for adolescents.
 - Initiation and Engagement of AOD Dependence Treatment
 - **Initiation of AOD Treatment: 39.19%** (Source: MCO HEDIS)
 - **Engagement of AOD Treatment: 11.93%** (Source: MCO HEDIS)
- Increase substance use disorder residential and intensive outpatient treatment capacity by 50%.
 - **82 AODE-residential provider agencies** (Source: OIG Provider Directory)
- Partner with stakeholders to increase the number of credentialed substance use treatment professionals by 25%.
 - **729 substance use treatment professionals** (Source: CADC Board/Deloitte Study))

Reduce deaths from drug overdose and reduce number of poor mental health days – cont'd

- Create a more comprehensive and open access behavioral health network and increase by 25% the number of behavioral health providers eligible to seek reimbursement from Medicaid by the end of 2015.
 - Behavioral health network opened January 2014 to qualified providers
- Increase by 25% the percentage of adults and children receiving medically indicated behavioral health services by the end of 2015.
 - Antidepressant Medication Management
 - Effective Acute Phase Treatment: 51.11% (Source: MCO HEDIS)
 - Effective Continuation Phase Treatment: 34.43% (Source: MCO HEDIS)
 - "Follow-Up Care for Children Prescribed ADHD Medication "
 - Initiation Phase: 38.83% (Source: MCO HEDIS)
 - Continuation and Maintenance (C&M) Phase: 45.87% (Source: MCO HEDIS)

Reduce deaths from drug overdose and reduce number of poor mental health days – cont'd

- Follow-Up After Hospitalization for Mental Illness (fuh)
 - 30-Day Follow-Up: 64.99% (Source: MCO HEDIS)
 - 7-Day Follow-Up: 46.50% (Source: MCO HEDIS)
- Increase the proportion of adults and adolescents who are screened for depression during primary care office visits by 10%.
 - Adolescent Screening/Counseling : Mental Health Assessment/Screening: 63% (Source: MCO HEDIS)
- Increase the proportion of persons with co-occurring substance abuse and mental disorders who receive treatment for both disorders by 10%.
 - 7890 persons with co-occurring substance abuse and mental disorders receiving treatment for both disorders. (Source: 2012 CMHC Client Event Data Set)

Reduce deaths from drug overdose and reduce number of poor mental health days – cont'd

- Partner with stakeholders to increase the use of Screening, Brief Intervention, and Referral to Treatment (SBIRT) to 25% of medical providers (primary care, prenatal care providers, and emergency departments).
 - In progress

Questions?

Presented By
Dr. Stephanie Mayfield
Commissioner

to the

The kyhealthnow Oversight Committee

Stephaniek.Mayfield@ky.gov

502.564.3970

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